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Bib Data Sheet

|  |   |                                  |   |   |
|--|---|----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/661,152   | <b>FILING DATE</b><br>09/13/2000<br><b>RULE</b> -   | <b>CLASS</b><br>370              | <b>GROUP ART UNIT</b><br><del>2868</del><br>2667  | <b>ATTORNEY DOCKET NO.</b><br>35.G2067D |
| <b>APPLICANTS</b><br>RIE SUZUKI, KANAGAWA-KEN, JAPAN;<br>YES AB  |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A DIV OF 08/974,964 11/20/1997<br>YES AB  |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 322713/1996 12/03/1996   |   |                                  |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/21/2000</b>   |   |                                  |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <u>AB</u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>12   | <b>TOTAL CLAIMS</b><br>38               |
| <b>INDEPENDENT CLAIMS</b><br>6   |   |                                  |   |   |
| <b>ADDRESS</b>   |   |                                  |   |   |
| 5514   |   |                                  |   |   |
| <b>TITLE</b>   |   |                                  |   |   |
| SPREAD-SPECTRUM COMMUNICATION METHOD AND APPARATUS   |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>1248   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |